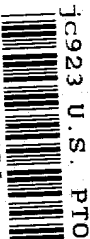


02/19/02



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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	5478-8A.1
	First Inventor	HIGGS, Dave
	Title	Protein and lipid sources for use in aquafeeds and animal feeds.
	Express Mail Label No.	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>	8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>
3. <input checked="" type="checkbox"/> Specification <small>[Total Pages 76]</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>[Total Sheets 2]</small>	ACCOMPANYING APPLICATION PARTS
5. Oath or Declaration <small>[Total Pages 78]</small> <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>	
6. <input type="checkbox"/> Application Data Sheet. <small>See 37 CFR 1.76</small>	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No.: **09/566,728**Prior application information: Examiner **Sayala, Chhaya D**Group / Art Unit: **1761**

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label			or <input type="checkbox"/> Correspondence address below		
<small>(Insert Customer No. or Attach bar code label here)</small>					
Name	Ian Fincham				
	McFadden, Fincham				
Address	Suite 606				
	225 Metcalfe Street				
City	Ottawa	State	Ontario	Zip Code	K2P 1P9
Country	CANADA	Telephone	(613) 234-1907	Fax	(613) 234-5233

Name (Print/Type)	Ian Fincham	Registration No. (Attorney/Agent)	26,375
Signature		Date	February 15, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **\$2,126.00**

Complete if Known

Application Number
Filing Date
First Named Inventor **HIGGS, Dave**
Examiner Name
Group Art Unit
Attorney Docket No. **5478-8A.1**

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number **13-0398**

Deposit Account Name **McFadden, Fincham**

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		101	740	Utility filing fee	740.00
		106	330	Design filing fee	
		107	510	Plant filing fee	
		108	740	Reissue filing fee	
		114	160	Provisional filing fee	
SUBTOTAL (1)					740.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
41	-20** = 21	18.00	378.00
15	-3** = 12	84.00	1,008.00
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
		103	18	Claims in excess of 20
		102	84	Independent claims in excess of 3
		104	280	Multiple dependent claim, if not paid
		109	84	** Reissue independent claims over original patent
		110	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **\$1,386.00**

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity / Small Entity

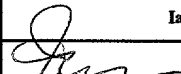
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non - English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR § 1.17(q)	
126	180	126	180	Submission of Information Disclosure Statement	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

SUBMITTED BY

Name (Print/Type) **Ian Fincham** Registration No. **26,375** Telephone **(613) 234-1907**
Signature  Date **February 15, 2002**

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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